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Intellectual Property Law

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USPTO FACSIMILE TRANSMITTAL SHEET

Page 1 of 2

Docket No.: VALTX.002A

CUSTOMER NO. 20995

Applicant : Jonathan Kagan et al.
App. No. : 10/699,589
Filed : October 31, 2003
For : APPARATUS AND METHODS FOR
TREATMENT OF MORBID OBESITY
Examiner : Suzette J. Jackson
Group Art Unit : 3738

CERTIFICATE OF FAX TRANSMISSION

I hereby certify that this correspondence and all marked attachments are being transmitted via facsimile to the USPTO Central Fax No. (703) 872-9306 on the date shown below:

March 11, 2005

Gerard von Hoffmann
Gerard von Hoffmann, Reg. No. 33,043

Transmitted herewith for filing and consideration in the above-referenced application are the following items:

(X) Amendment/Response in 14 pages.

(X) Non-Final

FILING FEES:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims minus 20; or Previously Paid	68 - 20 = 48	1202 (\$50)	48 x 50 =	\$2,400
Independent minus 3; or Previously Paid	4 - 3 = 1	1201 (\$200)	1 x 200 =	\$200
SUB TOTAL				\$2,600
The present application qualifies for Small Entity status under 37 CFR § 1.27. Fee reduced by 1/2.				(\$1,300)
TOTAL FEE DUE				\$1,300

(X) Please charge the total fees due in the amount of \$1,300 to Deposit Account No. 11-1410.

(X) Total pages in transmission: 16

BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10699589

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

TOTAL CLAIMS	6	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	6 minus 20 =	
INDEPENDENT CLAIMS	1 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	68	Minus	6	20 = 48
	Independent	4	Minus	1	3 = 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		Minus		
	Independent		Minus		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		Minus		
	Independent		Minus		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	770.00
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL	385	OR	TOTAL	

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=	2,400	OR	XS18=	
X43=	200	OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9=		OR	XS18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	